

LSSU Foundation Fundraising Activities Form

In an effort to coordinate all fundraising activities, please follow the steps below to finalize your fundraising plan:

- Complete the Fundraising Activities Form.
- Obtain the required signatures from your department head and/or dean.
- Attach a copy of your fundraising plan and solicitation letter, newsletter & all printed material to this questionnaire. *(Any documents requiring use of University logos must be approved by the LSSU Graphics Department following approval by our office).*
- Return the form and all supporting documents to the attention of Sharon Dorrity at the LSSU Foundation.

Within one week of submitting this form, you will receive a response to your request. Please allow four to six weeks prior to mailing date for your mailing to be produced.

Please: **print**, complete **all sections** and **DO NOT** leave any blank spaces

Department or organization Campus Address

Contact person Phone Email

Project for which funds are being raised

*(If funds are being raised for capital improvements, or equipment/ projects valued in excess of \$10,000, please also complete the **Major Campaign Request Form** available on the LSSU Foundation Web-Site).*

This is an **annual appeal** **one time request**

Total Fundraising Goal Amount solicited per individual

Type(s) of prospects to be contacted (i.e. alumni, parents, businesses, etc)

How are funds being solicited (i.e. telephone, mail, newsletter, website, e-solicitation, etc.)

Are you requesting use of the secure online giving site for your fundraising effort? **Yes** **No**

What is the timeframe of your fundraising? Start date: / / End date: / /

Do you have an account established with the LSSU Foundation? **Yes** **No**

Are you providing: letterhead #10 (mailing) envelopes other printed materials?
The Foundation will provide #9 (return) envelopes – at cost.

Please list other materials to be mailed and mailing dates _____

Remember to attach a copy of ALL printed materials to this form.

Are you assembling the mailing & delivering it to the Mailroom? **Yes** **No** (If no, who will be _____)

Do you need **a mailing list** (excel spreadsheet) or **address labels** for this mailing?

Please use this section to select the information required for the mailing list or labels

Recipients (check all that apply)

- Alumni
- Friends
- Former student/non grads
- Other (specify) _____
- Corporations
- Foundations
- Faculty/staff

Selection Criteria (check all that apply)

- City(ies) (specify _____)
- State(s) (specify _____)
- Zip code(s) (specify _____)
- Regional (within a _____ mile radius of _____ -selection point)
- Major (specify _____)
- Athlete/sport (specify _____)
- Member of club/organization (specify _____)
- Grad year(s) (specify _____)

Type of list requested (check one)

- Standard Mailing (Name, mailing address, phone number, email address)
- Expanded Mailing (Name, mailing address, phone number, email address, major, grad year, degree)
- Complete Mailing (Name, mailing address, phone number, email address, major, grad year, degree, employer, job title, activities)
- Standard Emailing (Name, email address)

How does your initiative relate to the University's Strategic Plan? _____

Other applicable information _____

Applicant Signature _____ Date _____

Department Head _____ Date _____

Dean (Where Applicable) _____ Date _____

LSSU Foundation Use Only:

Date received: Received by: _____

Foundation Approval? Yes No Date: Approved By: _____

Date List Requested: Date Content Reviewed:

Mailing Exclusions: Do not mail Do not solicit Do not email Other _____ Spouses

Date Submitted to Graphics: Submitted by: Foundation _____
Organization/contact person

Scheduled Date for Production:

Other applicable information: _____
